| ,,   |                                  |   |                  |            | Application or Docket Number |           |                     |                        |  |
|--|----------------------------------|---|------------------|------------|------------------------------|-----------|---------------------|------------------------|--|
| PATENT APPLICATION FEE DETERMINATION RECORD Effective December 29, 1999  |                                  |   |                  |            |                              |           |                     |                        |  |
| CLAIMS AS FILED - PART I (Column 1) (Column 2)   |                                  |   |                  | SMA<br>TYP | LL ENTI                      | Y<br>OR   | OTHER<br>SMALL      |                        |  |
| FOR  | NUMBER FILED NUMBER EXTRA        |   | EXTRA            | RAT        | E FE                         | ĒΊ        | RATE                | FEE                    |  |
| BASIC FEE  |                                  | . 9   |                  | 345        | RO 00                        | 10. 200 E | 690.00              |                        |  |
| TOTAL CLAIMS   | / minus                          | 10=   |                  | XS         | -                            | OR        | X\$18=              |                        |  |
| INDEPENDENT CLADAS   |                                  |   |                  | X39=       |                              | OR        | X78=                | 78                     |  |
| MILITIPLE DEPENDENT CLAIM PRESENT .  |                                  |   |                  |            | -                            | OR        | +260=               |                        |  |
| "If the difference in column 1 is tess than zero, enter "0" in column 2  |                                  |   |                  |            | u _                          |           | TOTAL               | 760                    |  |
| CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)   |                                  |   |                  |            | LL ENTI                      | Y OR      | OTHER<br>SMALL      |                        |  |
| ∢ \ REA  | CALING BEST AV. FTER NOMENT      | PREVIOUSLY<br>PAID FOR                      | OPY<br>EXTRA     | RAT        | ADI<br>E TION<br>FE          | IAL       | RATE                | ADDI-<br>TIONAL<br>FEE |  |
| Total •  | 15 Minus                         | 14  | 3                | X\$ 9      |                              | OFI       | X\$18=              | ·                      |  |
| AME  Total  Independent  | 5 Minus                          | 4   | - /              | X39        | • •                          | OR        | XXII=               | 86.                    |  |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM   |                                  |   |                  |            | -                            | OA        | +260=               |                        |  |
|  |                                  |   |                  |            | AL EE                        | OR        | TOTAL<br>ADDIT, FEE | 8% -                   |  |
| (Column 1) 2-28-05 (Column 2) (Column 3)   |                                  |   |                  |            |                              |           |                     | -                      |  |
| CO REA   | AMENG<br>FTER<br>HOMENT          | NIGHEST<br>NUMBER<br>PREVIOUSLY<br>PAID FOR | PRESENT<br>EXTRA | RATI       | ADE<br>TION<br>FEI           | AL        | RATE                | ADDI-<br>TIONAL<br>FEE |  |
| AAME Total Independent   | 15 Minus                         | -30   | •                | . X\$ 9    | -   _                        | OR        | X\$18=              |                        |  |
| Independent •  | Minus                            | ENDEAT CLAIM                                | •                | X39:       | -                            | OR        | X78=                |                        |  |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM   |                                  |   |                  |            |                              | оя        | +260=               |                        |  |
|  |                                  |   |                  |            | EE                           | OR        | ADOIT, FEE          |                        |  |
| (Column 1) 4-6-05 (Column 2) (Column 3)  |                                  |   |                  |            |                              |           | ·                   |                        |  |
| U REN  | AMAS<br>IAMENG<br>FTER<br>NOMENT | HIGHEST<br>HUMBER<br>PREVIOUSLY<br>PAID FOR | PRESENT<br>EXTRA | RATE       | ADD<br>TION                  | AL        | RATE                | ADDI-<br>TIONAL<br>FEE |  |
| AMEI   | 15 Minus                         | 20  |                  | X\$ 9      |                              | OR        | X\$18=              | -                      |  |
| Independent •  | 5 Minus                          | <i>5</i>                                    | •                | X39-       | .                            | OR        | X78=                |                        |  |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM   |                                  |   |                  |            | .   _                        | OR        | +260=               |                        |  |
| " If the empy in column 1 is less than the entry in column 2, write "V" in column 3.   |                                  |   |                  |            |                              | OR        | YOTAL               |                        |  |
| "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  "If the "Highest Number Previously Paid For" (Focal or Independent) is the highest number tourid in the appropriate box in column 1. |                                  |   |                  |            |                              |           |                     |                        |  |
| The Trighest Number Previously Paid For (1909 or stoependary) is the digital number country of the deproduced out in country 1.  |                                  |   |                  |            |                              |           |                     |                        |  |

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